Combined Uniform Household Goods Bill of Lading and Freight Bill

SCPSC 9733 NCUC 2469 USDOT 1183978 MC 497933-C

KELLY MOVING INC PO BOX 517 CAMPOBELLO, SC 29322 864-468-5059

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FOR TIME RECORD _____Tel. _____ Start _____ PROCESSING Customer Initials Finish____ ___ A.M. __ Customer Initials To ______Apt. ____ JOB HOURS TRAVEL TIME Other Stops _____ TOTAL HOURS Moving Date______ Day _____ Time _____ A.M. Moving Rate:______Vans_____ Men @ \$____ ____ Per Job Hr., Plus _____ Hrs. Travel T≌ne RATES AND DESCRIPTION CHARGE ESTIMATE OR REMARKS (Approx. estimate-packing date-Instructions on job-or other info.) MOVING_____ hours@ \$____ per hr. OVERTIME _____ hours@ \$____ per hr. CARTAGE _____ cu. ft.@ \$ ____ per cu. ft. WEIGHT_____ lbs. @ \$____ per lb. VALUATION SHIPPER - IMPORTANT - READ BEFORE SIGNING BELOW PIANO CHGS. SCP\$C OTHER _____ Customer (Shipper) is required to declare in writing the released value of the property. The agreed or declared value of the property is hereby specifically stated by the customer (shipper) and confirmed by their signature hereon to be NOT _____ Barrels, packed _____ @ \$ ____ each exceeding 30 () cents per pound per article unless specifically excepted. The Customer (Shipper) hereby declares valuations in excess of the above limits on the _____ Barrels, loaned _____ @ \$ ____ each following articles. _____ Wardrobes_____ @ \$ ____ each Article Value ___ Cartons or boxes____ @ \$ ____ each _____ Matt Cartons_____ @ \$ ____ each Other___ IMPORTANT (SIGN BEFORE START OF ANY SERVICE) Whse. Labor chgs._____ The Shipper, subject to and based on the rates, rules, regulations, and conditions in the carriers lawfully published tariff hereby orders the carrier to furnish transpor-Storage chgs. tation facilities and service described herein subject to all conditions herein contained including valuation agreed or declared and the conditions on the back Other___ hereof which are hereby agreed to by the Shipper and accepted for himself and his assigns. Unless credit arrangements are made in writing the Shipper agrees to pay Carrier Liability; shipper declares the full value of the charges in cash, money order, or certified check prior to complete delivery. shipment for the purpose of carrier liability to be: CUSTOMER: _____ Amt. \$_____ @ \$____ per \$100.00 BY:_____ MOVER: ___ **TOTAL CHARGES** BY:_ Advance Deposit **DELIVERY RECEIPT** BALANCE DUE Except as specifically endorsed hereon All services and All articles received in Good Condition RECEIVED PAYMENT CUSTOMER: _____ MOVER: